

Profile Training

By

Col Mary Ann Orzech

Correctly assigning profiles to military personnel is essential to the qualifying active duty members for worldwide duty. To correctly assign profiles requires effective training. This training is frequently accomplished at the MTF through a five-minute briefing at a professional staff meeting, commonly repeating what is stated in AF 48-123. Furthermore, the administrative aspects of the program are emphasized rather than the clinical decision-making process.

During a recent Eagle Look review of the medical profiling process, the case scenario method was identified as a more effective methodology to train providers. Clinical scenarios were used as a mechanism to identify how providers profile particular medical cases. . The clinical case example is a successful tool used by many medical training programs.

Develop case scenarios from your particular facility, especially cases that are not clear-cut. Discuss these cases during staff meetings or professional staff meetings. Examples of clinical scenarios are presented below:

Case 1: A 40 year-old active duty medical technician had a blood pressure of 160/100 during his annual PHA exam. The average blood pressure following a 5-day BP check was 150/100. The patient was being treated with two medications, an ACE inhibitor, Lisinopril and a beta blocker, Lopressor. The medication was adjusted and the blood pressure stabilized at 130/70. BUN and CR were mildly elevated. Physical exam was normal.

Answer: P3

Case 2: 30 year-old active duty administrator has been diagnosed with a major depression and has been hospitalized. The administrator admits to thoughts of suicide and has a plan to carry it out.

Answer: S4T

Case 3: A 45 year-old active duty maintenance officer has a family history of paternal diabetes. He had an initially elevated fasting glucose of 200 mg/dl. After a 6-month treatment with an oral hypoglycemic agent, Metformin, his fasting glucose stabilized around 70 mg/dl.

Answer: P4T and MEB